APPOINTMENT SLIP (DA Pam 600-8)			
		1 4 No. 11	
(Grade and Name)		(SSN)	(Unit)
has an appointment with			
	(Name, Location, Bldg. No., Date and Time)		
Reason for appointment:			
		(Signature of 1SG/Cdr or Supervisor)	
Time Lefa III-ia	Time Assisted Assa	Time Left Appt	Time Arrived Unit
Time Left Unit	Time Arrived Appt	time Lett Appt	time Arrived Unit
		10: 14	
		(Signature of Appropriate Su	pervisor at appointment site)
THI	S SLIP MUST BE RE	TURNED TO ORIGINATO	OR

FK FORM 130-E, AUG 88

V1.00